

PTO/SB/01 (10-01)

Approved for use through 10/1/2003. OMB 0551-0022
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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	100-001065(PAR)
	First Named Inventor	Lawrence PESKA
	COMPLETE PAPER	
	Application Number	
	Filing Date	
	Art Unit	
	Examiner Name	

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

APPARATUS AND METHOD FOR WASHING OF ITEMS

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understood the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (e), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 366(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
PROVISIONAL APPLICATION S/N 60/404,584	UNITED STATES	08/20/2002	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	UNDER		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	35 U.S.C. 119(e)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/026 attached hereto.

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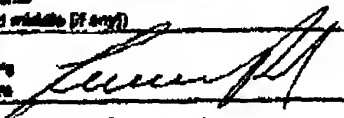
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Approved for use through 10/31/2002, OMB 0551-0002

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DECLARATION — Utility or Design Patent Application

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Country: USA	Telephone: 914 674-1094	Fax: 914 674-1094	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the lies so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name: Lawrence		Family Name: Peska	
(First and middle (if any))		(or Surname)	
Inventor's Signature: 		Date: 8/20/03	
Residence: City: Garnerville	State: New York	Country: USA	Citizenship: USA
Mailing Address: 12 Frederick Street			
City: Garnerville	State: New York	ZIP: 10923	Country: USA
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name: (First and middle (if any))		Family Name: (or Surname)	
Inventor's Signature:		Date:	
Residence: City:	State:	Country:	Citizenship:
Mailing Address:			
City:	State:	ZIP:	Country:
<input type="checkbox"/> Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.			

(Page 2 of 2)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	Lawrence PERKA
ID#	Apparatus and Mths.
Group Art Unit	
Examiner Name	
Attorney Doctate Number	180-001(PAR)

I hereby appoint:

☐ Practitioner(s) of Customer Number

OR

☒ Practitioner(s) named below:

Name	Registration Number
David Aker	88,277

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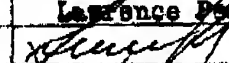
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I am the:

☒ Applicant/inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/88).

SIGNATURE of Applicant or Assignee of Record

Name	Lawrence PERKA
Signature	
Date	8/20/03

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representatives are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

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